. 12							'Application or Docket Number					
	APPLICATION EHOC	ON FEE D	ETERM per 1, 20	INATIO	ON RECO	RD.		100	93	25	4	
							ALL E	mr —	OR	OTHER SMALL	THAN	
TOTAL CLAIMS		15				F	ATE	FEE		RATE	FEE	
FOR		NUMBER	FLED	NUMB	ER EXTRA	DA	ac fee	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS		15 minus 20=		•]		×	S 9=		OR	XSi8=	·. ·	
INDEPENDENT CLAIMS		minus 3 =		1.		1	(43-		OR	X86=		
MULTIPLE DEPE	RESENT				١.	145-		OR	+290=			
If the difference in column 1 is less than zero, enter "O" in dolumn 2							OTAL		ря	TOTAL		
						•	•	و در شدی	14. j. z.	OTHER	THAN.	
バーバーハ	(Column 1)		··· (Cob	un S) Ances	(Column 3)	Spirit	AALT	EMMIX	OF	SHALL	Ennix.	
4	CLAMS REMARKS AFTER		HIGH NUM PREVA	EST BEA OUSLY	PRESENT		MTE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
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) E	REMAINING AFTER AUSTRIANS		PREV	MDER MOUSL'I DECA	PRESENT E-THA		RATE	TIONAL		RATE	TION	
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* If the entry or column 1 as less than the unity or column 2, waster "0" as column 3.							TOTAL	}	-	TOL		
" If the "Highest !	Author Premiusly	Pad For IN 1	MEZ ZAMOR	@ 14255 m	CO 20, 171001 1	D. VD	CIT. FEE		JOA	A	£	
The "Highest M	Number Provously umber Provously P	ing to, Light	or Indepte	d(m) 6 8	to highest mar	ber laund	in the R	pproprsite b	Der HT C	ORPHIN 3		
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